		FORM	OF
R INSTRUCTIONS, SEE BACK OF FORM		DR-1	ORGANIZATION
RINSTRUCTIONS, SEE EXTEN	÷	(Rev. 07/00)	ONO/III.
CK ONE: his is an initial* Statement of Organization	IA ETHICS AND	For Office U	se Only
	"A MONION DICCL DOLLOG BOL		
	an's accepting contributions.	Comm.#	
his is an affection of Organization should be filled within 10 days of the committen itial Statement of Organization should be filled within 10 days of the committen of Organization should be specified Statements of Organization.	ould be filed within 30 days of a	Indexed	
nd expenditures or incurring indebtedness exceeding \$300. American ge. Penalties may be imposed for late-filed Statements of Organization.	2803 NOG -3 NIT 0-21		
ge. Penaities may be imposed to the	·		
COMMITTEE NAME (Required by law)	mittee		
Appphoose County Republican Central Con			
прерги			Dellet lecue/Franchise
MPORTANT: Indicate type of committee you are reporting for: 1)Statewide/Legislative Candidate (2)Statewide PAC (3)State Party (committee (7)County/City Central Committee (8)Support slate of cand	4)County/Local Candidate (5)Co didates (list candidates under purpo	ose of committ	ee)
MMITTEE TREASURER This address used for all reminders and	COMMITTEE CHAIR (List addition	nai Onicers on G	;
quired by law) correspondence) add - C	o-Chairman		
quires by they	Name Richard T Mailing Address 26237 Hwy City, State Zip Code	- 1	
Name	Kichard 1	aylor	
Mary Ann Wetmore	Mailing Address		,
Mailing Address	26237 HWY	1.200	
17796 200th Avenue	City, State Zip Code		
City State Zip Code Centerville, Iowa	1 M LL	625	/
Centervisa	Phone (641) 895	3007	
Phone (641 647-2624	e-Mail rt _ mm/	10.+	ins net
Phone (04 V 114 V 2021	e-Mail rt _ mm!	At receipt for land	ainst hallot issue(s)
o Mail		MOVOCATE TOTAG	
Advantage of COMMITTEE - Check One Box LI Adv	rocate for/against candidate(s)		
e-Mail INDICATE PURPOSE OF COMMITTEE - Check One Box Adv			
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